

General Information



## **Summer Youth Employment Program Application**



Carefully read the program requirements and follow the instructions. Please print clearly. Application Packet must include a reference letter, family income worksheet, and required documents from the checklist on page 6. Late applications will not be accepted. Applications must be submitted or postmarked by 5pm on March 31, 2016.

## Last Name\_\_\_\_\_ First\_\_\_\_\_ Middle \_\_\_\_\_ Address \_\_\_\_\_ City \_ Surprise \_\_ Zip Code Home Phone \_\_\_\_\_- Cell Phone \_\_\_\_- Preferred method of contact \_\_\_\_\_ Valid Email Address for Applicant \_\_\_\_\_ Valid Email Address for Parent/Guardian \_\_\_\_\_ ■ Male □ Female Age \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_ Sex: Current grade \_\_\_\_\_ School \_\_\_\_ Parent/Guardian Name\_\_\_\_\_\_ Daytime phone \_\_\_\_\_-\_

## Work Experience and Interests

Final participants will receive a SYEP shirt.

Have you participated in the SYEP Program before? ☐ Yes

Please make sure this section is filled out to the best of your ability. This information will help us in our efforts to find you a job you will enjoy and will provide you with the best experience possible. (attach resume if necessary)

□ No

 $\square$ XL

□XXL □XXXL

If you have worked before, please describe your two most recent jobs:						
1.	Where? _		When?			
2.	Where?_		When?			
List any clubs, groups, or volunteer positions you have participated in the past two years.						

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•	SERVICE SCHOOL SETT
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Do you have any special skills, interests or hobbies you would be interested in using at your summer job?

## What City departments interest you?

From the following list, please check any that apply: (Refer to www.surpriseaz.gov for more information on city departments)

	Accounting Firm		Fire Department		Economic Development
	Aquatic Center		Doctor's Office		Development Services
	City Council		City Court		Neighborhood Services
	City Cafe		Building Safety		Small Business (TechCelerator) Vet Office
	Senior Center		Dental Office		Public Works Facilities Maintenance
	Recreational Summer Camp		Public Works Administration		Law Office
	Finance Administration		Public Works Field Operations		Vet Office
	Finance Purchasing		Public Works Fleet		
	Human Resources		Services		
	Public Works Engineering Law Office		Public Works Customer Service		
e indicate your top 4 department choices:					

# Pleas

1 <sup>st</sup> choice	2 <sup>nd</sup>	J	4 <sup>th</sup>	
			_	

## What would a day at your ideal job look like?

Please answer the questions below:

#### Circle one of the following:

1.	Working outdoors	Working in an office	Both indoors and outdoors
2.	It's o.k. to get dirty at work	I must stay clean at work	I can roll up my sleeves when needed
3.	Some repetition is ok	Every day has to be different	Every day should be the same





#### Circle three of the following:

Working on a team

	Helping others	W	orking with machinery	Work	ing with technology
	Working with kids	Wor	king with Senior Citizens	Wo	orking on phones
	Working in construction	W	orking in a courtroom	Work	ing with my hands
	Working on logistics/planning		Working in an office		
Descri	ibe your ideal job:				
Are th	nere any special commen	ts you'd	l like to add?		
<b>Availa</b> Are you a	<b>bility</b> vailable to work May 30th through July	/ 29th, 2016	5?		
Do you pl	an on going on any trips or vacations o	during this ti	me?		
Indicate y	our available hours:				
Mon _	to W	'ed	to	Fri	to
Tues _	to TI	nurs	to	Sat	to
Are you le	egally authorized to work in the U.S.? _				
Do you ha	ave access to reliable transportation?				

Working with the public

Working in public safety

#### Reference

Please attach a letter of reference from your high school teacher, counselor, or other non-related adult, explaining why you should be selected for the Summer Youth Employment Program. If you are unable to attach this letter to your application before the deadline, it will be due at the time of your interview (if selected).

Name of Potoropeo	Polationship to applicant
Name of Neference	Relationship to applicant
Phone Email	
Authorization	
I hereby certify that the information on this app	lication is correct to the hest of my knowledge
Thereby certify that the injoination on this app	ticution is correct to the best of my knowledge.
Applicant Signature	Date
to participate in all activities associated with the	s a resident of the City of Surprise and has my permission e Summer Youth Employment Program. I also give my ity publications or program-related media accounts,
Parent/Guardian Signature	Date

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	TOTAL ODGG	
OTAL # OF HOUSEHOLD MEMBERS:	MONTHLY IN	SS (before taxes) NCOME:
	X 12 = GROS	SS ANNUAL
FY2016 Income Limits		
publication of HUD's FY 2016 programmatic Income Limits will occur for delines issued by the Department of Health and Human Services (HHS). These extremely low-income families as very low-income families whose it is proverty guidelines as published by HHS or 30 percent of area media 2016 Income Limits will be published in March, 2016.  In person who knowingly makes a false statement or a mission at the program.	The 2014 Consolidation of the control of the contro	ated Appropriations A xceed the greater of HUD anticipates that
	l information is t	rue and correct
certify that all listed (Print Name)	i ilijoi iliatioli is t	rue una correct.
ent or Guardian Signature	Do	ate
f Use Only		
DIAN INCOME:		
CENT OF MEDIAN INCOME: %		





## Summer Youth Employment Program 2016 Required Documents Checklist

In order to be eligible for the Summer Youth Employment Program you must provide proof of age, residence, family income, and permission to work in the United States.

You must submit **copies** of one (1) item from categories 1-5 listed below as it applies to you. Note that some documents may satisfy more than one category (e.g. U.S. Birth Certificate or current U.S. Passport for categories 1 and 3)

1.	oof of <u>AGE</u> (15-19 by May 30 <sup>th</sup> , 2016)  Birth Certificate OR  AZ State Issued License OR  Valid U.S. Passport
2.	ocial Security Number
	Social Security Card (ONLY if hired)
3.	oof of Citizenship/Alien Status
	Valid U.S. Passport OR
	U.S. Birth Certificate OR
	Alien Registration Card
4.	oof of RESIDENCE in Surprise, AZ (Dated within the last 6 months)
	Home Utility Bill OR
	Current Lease OR
	Official Mail from a Federal, State or City Agency
5.	oof of Family INCOME (Dated within the last 6 months)
	Supported by Public Assistance
	Current EBT Card (with parent/guardian name) AND a recent store receipt OR
	Current Benefit Letter OR
	Official Letter from Social Services (Must include applicant's name, Benefit # and date) OR
	Not Supported by Public Assistance
	Two (2) consecutive pay stubs dated within the last 6 months (Must include payee name, and gross income) OR
	2015 W-2 form and one (1) pay stub dated within the last 6 months OR
	Current Pension Award Letter OR
	Current SSA Award Letter OR
	Current Unemployment Benefit Document OR
	If self-employed, 2015 Tax Return including Schedule "C" or "E" (if receiving rental income)

If your parent or guardian does not work, please use the **Statement of No Income** 





### Summer Youth Employment Program

#### Statement of No Income

This form is only to be completed by a <u>parent or guardian</u> who presently earns no income.

	I,employed, and I do not intend to resume	
	I,employed; however, I am actively seeking immediately when I become reemployed.	, hereby certify that I am presently not employment. I agree to notify the City of Surprise
(Prin	t Name)	(Date)
(Sign	nature)	

SECTION 1001 OF TITLE 18, UNITED STATES CODE PROVIDES; "WHOEVER, IN ANY MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES KNOWINGLY AND WILLFULLY FALSIFIES, CONSEALS OR COVERS UP BY ANY TRICK, SCHEME, OR DEVICE A MATERIAL FACT, OR MAKES ANY FALSE, FICTICIOUS OR FRAUDULENT STATEMENTS OR REPRESENTATIONS, OR MAKES OR USES ANY FALSE WRITING OR DOCUMENT KNOWING THE SAME TO CONTAIN ANY FALSE, FICTICIOUS OR FRAUDULENT STATEMENT OR ENTRY, SHALL BE FINED UNDER THIS TITLE OR IMPRISONED NOT MORE THAN FIVE YEARS, OR BOTH."